## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 200312292-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and

| patent is sought on the inv  |   | -  | lich is claimed and for which a   |  |
|--|---|--|---|--|
| the enceification of which   | is attached hereto unless th  | a following hov is a   | hackad:   |  |
|  |   |  |   |  |
|  | as US Application No. or PCT International Application  |  |   |  |
|  | and was amended on (if applicable).   |  |   |  |
| including the claims, as a   | e reviewed and understood<br>mended by any amendment<br>nich is material to patentabili                       | t(s) referred to abov  | e above-identified specification,<br>ve. I acknowledge the duty to<br>CFR 1.56.   |  |
| inventor(s) certificate listed belo                                      | enefits under Title 35, United State  | ny foreign application for                                       | any foreign application(s) for patent or r patent or inventor(s) certificate having   |  |
| COUNTRY  | APPLICATION NUMBER  | DATE FILED   | PRIORITY CLAIMED UNDER 35 U.S.C. 119  |  |
|  |   |  | YES: NO:  |  |
|  |   |  | YES: NO:  |  |
| Provisional Application  |   |  |   |  |
| * *  | Title 35, United States Code Section  | tion 119(e) of any Unite   | d States provisional application(s) listed  |  |
|  | APPLICATION NUMBER  | FILING DATE  |   |  |
|  |   |  |   |  |
|  |   |  |   |  |
| information as defined in Title 3  | ragraph of Title 35, United States 7, Code of Federal Regulations, Sec CT international filing date of this a | ction 1.56(a) which occu   | nowledge the duty to disclose material rred between the filing date of the prior  |  |
| APPLICATION NUMBER   | FILING DATE   | STATUS (patented/pending/abandoned)                              |   |  |
|  |   |  |   |  |
|  |   |  |   |  |
|  |   |  |   |  |
|  | appoint the following attorney(s) emark Office connected therewith:   | and/or agent(s) to pros  | secute this application and transact all  |  |
| Customer Nu  | mber 022879   | Place Customer<br>Number Bar Code<br>Label here                  |   |  |
| Send Correspondence to:  |   | Direct Telepho   | one Calls To:   |  |
| HEWLETT-PACKARD COMP. Intellectual Property Adminis                      |   | WILLIAM STR  | REETER  |  |
| P.O. Box 272400 970-898-3886   |   | 6  |   |  |
| Fort Collins, Colorado 8052  | 7-2400  | 370-030-300  |   |  |
| made on information and with the knowledge that imprisonment, or both, u | belief are believed to be to willful false statements.  | true; and further th<br>and the like so m<br>18 of the United St | are true and that all statements at these statements were made ade are punishable by fine or ates Code and that such willfulent issued thereon. |  |
| Full Name of Inventor: _JOSE   | GERMAN RIVERA   | Citizenship: C   | 0   |  |
| Residence: SUNI  | NYVALE, CA, USA   |  |   |  |
| Post Office Address: 1263  | RIESLING TERRACE, SUNN  | YVALE, CA 94087  | - 41  |  |
| Inventor's Signature   | ~K.ff   | $\frac{2/15/0}{Date}$  | 94  |  |
| Box 10/03 (DecByy)   | (Lies Page Two For Additional Inventor)   | e) Signatura(e))   | Page 1 of 2   |  |

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 200312292-1

| Full Name of joint inventor: | LILLIAN CHOU                           | Citizenship: US    |                                       |  |
|------------------------------|--|--------------------|---------------------------------------|--|
| Residence:                   | LOS ALTOS, CA                          | .TOS, CA           |                                       |  |
| Post Office Address:         | 1972 ANNETTE LANE, LOS ALTOS, CA 94024 |                    |                                       |  |
| Stand                        |  | 2/19/04            |                                       |  |
| Inventor's Signature         |  | Date               |                                       |  |
|                              |  |                    |                                       |  |
| Full Name of joint inventor: |  | Citizenship:       |                                       |  |
| Residence:                   |  |                    |                                       |  |
| Post Office Address:         |  |                    |                                       |  |
| Inventor's Signature         |  | Date               |                                       |  |
| -                            |  |                    |                                       |  |
| Full Name of joint inventor: |  | Citizenship:       |                                       |  |
| Residence:                   | <del></del>                            |                    | · •·                                  |  |
| Post Office Address:         |  |                    |                                       |  |
|                              |  |                    |                                       |  |
| Inventor's Signature         | <u> </u>                               | Date               | , , <u>" "</u>                        |  |
|                              |  |                    |                                       |  |
| Full Name of joint inventor: |  | Citizenship:       |                                       |  |
| Residence:                   |  |                    |                                       |  |
| Post Office Address:         |  |                    |                                       |  |
| Inventor's Signature         |  | Date               |                                       |  |
|                              |  | Date               |                                       |  |
| Full Name of joint inventor: |  | Citizenship:       |                                       |  |
| Residence:                   |  | Okazonomp <u>.</u> |                                       |  |
|                              | <del></del>                            |                    |                                       |  |
| Post Office Address:         |  |                    | · · · · · · · · · · · · · · · · · · · |  |
| Inventor's Signature         |  | Date               |                                       |  |
|                              |  |                    |                                       |  |
| Full Name of joint inventor: |  | Citizenship:       |                                       |  |
| Residence:                   | · · · · · · · · · · · · · · · · · · ·  |                    |                                       |  |
| Post Office Address:         |  |                    |                                       |  |
| Inventor's Signature         |  | Date               |                                       |  |
| voiito. v oiginatare         |  | Date .             |                                       |  |
| Full Name of joint inventor: |  | Citizenship:       |                                       |  |
|                              |  | Citizensing.       |                                       |  |
| Residence:                   |  |                    | · · · · · · · · · · · · · · · · · · · |  |
| Post Office Address:         |  |                    |                                       |  |
| Inventor's Signature         |  | Date               |                                       |  |